



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

CONFIRMATION NO. 9109

Bib Data Sheet

|  |   |                                  |   |   |
|--|---|----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/030,992   | <b>FILING OR 371(c) DATE</b><br>01/16/2002<br><b>RULE</b>   | <b>CLASS</b><br>370              | <b>GROUP ART UNIT</b><br>2616   | <b>ATTORNEY DOCKET NO.</b><br>L9289.02101 |
| <b>APPLICANTS</b><br>Mitsuru Uesugi, Yokosuka-shi, JAPAN;<br>Katsuhiko Hiramatsu, Yokosuka-shi, JAPAN;<br>Kazuyuki Miya, Kawasaki-shi, JAPAN;<br>Osamu Kato, Yokosuka-shi, JAPAN;<br>Junichi Aizawa, Yokohama-shi, JAPAN;<br>Toyoki Ue, Yokosuka-shi, JAPAN; |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP01/04154 05/18/2001  |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2000-150507 05/22/2000<br>JAPAN 2001-078466 03/19/2001   |   |                                  |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 04/11/2002</b>   |   |                                  |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged   | Examiner's Signature _____<br>Initials _____  | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>13                 |
| <b>INDEPENDENT CLAIMS</b><br>4   |   |                                  |   |   |
| <b>ADDRESS</b><br>24257  |   |                                  |   |   |
| <b>TITLE</b><br>SYSTEM AND METHOD FOR REGULATING DATA TRANSMISSION IN ACCORDANCE WITH A RECEIVER'S EXPECTED DEMODULATION CAPACITY  |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>974  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |

NR  
2-13-7